

# APPLICATION COMPLETENESS CHECKLIST NJPDES/Discharge to Surface Water Permit Categories A/A8/CSO- Domestic Surface Water/Discharge to Regional Outfall Authority/Combined Sewer Overflow(Individual permits)

TO HELP US PROCESS YOUR APPLICATION MORE EFFICIENTLY, PLEASE PROVIDE ALL ITEMS LISTED BELOW.

This checklist is applicable to new permit, renewal, revocation and reissuance, or modification under categories A, A8 & CSO. Should you have any questions, please contact the Bureau of Point Source Permitting Region 1 or Region 2, at (609) 633-3869 or (609) 292-4860. Be sure to read all instructions and to answer all questions when filling out the application forms. If an item is not applicable, enter "N/A" or a similarly appropriate response.

#### ALL APPLICANTS SHALL SUBMIT THE FOLLOWING:

#### FORM NJPDES – 1

Instructions are provided with the form.

#### NJPDES TECHNICAL FORM – (FORM A)

(This form replaces EPA's NPDES Form-2A & Technical Form #1) Instruction are provided on a separate document.

#### **RESIDUALS APPLICATION FORM – R**

Instructions are provided with the form.

#### NJPDES FORM SIU -1

Submit one form for each Significant Indirect User (SIU) not previously served by the applicant and reported to the Department. If there is no such SIU, or the treatment system is privately owned and operated, submit one copy of the form indicating NONE in response to the request for "User Name".

IN ADDITION TO THE ABOVE, APPLICANTS PROPOSING: 1) A NEW DISCHARGE; OR 2) AN INCREASE IN FLOW OR A CHANGE IN LOCATION OR A CHANGE IN METHOD OF DISCHARGE FOR AN EXISTING DISCHARGE SHALL SUBMIT THE FOLLOWING:

## EVIDENCE OF PERMIT APPLICATION SUBMISSION TO THE AFFECTED SEWERAGE ENTITY(IES) AND MUNICIPALITY

Submit copies of the signed and dated notices that were sent along with the application to the affected sewerage entity(ies) and municipality via "Certified Mail-Return Receipt Requested" or by other means, and copies of the dated certified mail return receipts or other means of verification of receipts.

**NOTE: Prior to submitting an application to the Department**, submit the following to the affected sewerage entity(ies) and municipality in accordance with N.J.A.C. 7:14A-4.3(a)13:

- 1. A copy of the application.
- 2. A written notice (certified mail return receipt requested or by other means which allows verification of the fact and date of receipt) that the sewerage entity(ies) and municipality must submit to the Department written comments regarding or objections to the proposed discharge or activity within 30 days of receipt of said notice. (These comments shall be considered by the Department in determining whether to issue a draft permit in accordance with N.J.A.C. 7:14A-15.6.)

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#### CONSISTENCY DETERMINATION

Submit evidence that a Water Quality Management Plan (WQMP) amendment approval, or favorable consistency determination has been applied for and received, or indicate the reasons, otherwise.

# IN ADDITION TO THE ABOVE, <u>ALL EXISTING PUBLICLY OWNED TREATMENT WORKS WITH AN APPROVED PRETREATMENT PROGRAM (DELEGATED LOCAL AGENCIES (DLAs))</u> SHALL SUBMIT THE FOLLOWING:

A list of all pollutants that the DLA has incorporated into an industrial user permit using Best Professional Judgement.

A written technical evaluation of the need to revise local discharge limitations as required under N.J.A.C. 7:14A-19.7(d).

#### **NEW DISCHARGERS** – PRE-APPLICATION MEETING

New dischargers should contact the Bureau of Point Source Permitting Region 1 or Region 2 to schedule **a pre-application meeting** to determine the need for further technical requirements.

#### **MODIFICATION TO EXISTING PERMITS:**

Applicants applying for a modification to their existing permits shall contact the Bureau of Point Source Permitting Region 1 or Region 2 to determine the appropriate module of the application package depending on the type of modification. (All forms indicated here may not be needed for all type of modifications.)

#### COMPLETE AND SUBMIT ONE ORIGINAL AND ONE COPY OF THE APPLICATION TO:

New Jersey Department of Environmental Protection
Division of Water Quality
Bureau of Permit Management
Attn: Administrative Review Unit
P.O. Box 029
Trenton, New Jersey 08625-0029

### IF THE DISCHARGE LOCATION IS UNDER THE JURISDICTION OF THE DELAWARE RIVER BASIN COMMISSION, ALSO SUBMIT A COPY OF THE APPLICATION TO:

Delaware River Basin Commission Planning Branch P.O. Box 7360 West Trenton, New Jersey 08628

Please note that additional technical information based on site specific conditions may be required by the Department pursuant to N.J.A.C. 7:14A-2.12(b) and N.J.A.C. 7:14A-4.3(e).

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